

## **Incident Report**

Print Date/Time: 08/08/2016 09:40

Login ID: ss0143

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00015276

Incident Date/Time: 8/4/2016 2:47:00 PM

**Location:** 9008 16TH PL SE

LAKE STEVENS WA 98258

**Phone Number:** (206) 769-6422

Report Required: No Prior Hazards: No LE Case Number:

Incident Type: Threat

Venue: Lake Stevens

 Source:
 911

 Priority:
 4

 Status:
 4

Nature of Call:

Unit/Personnel

Unit Personnel

19S15 SS0072-Aukerman

Person(s)

No. Role Name Address Phone Race Sex DOB

1 Reporting Party CHAMBERS, MARK (206) 769-6422

1 Driver GARRETT, KRISTINA 15806 82ND ST (425) 314-6862 White Female 02/09/1990

LEE

Lake Stevens WA 982589050

Vehicle(s)

RoleTypeYearMakeModelColorLicenseStatePlate InquiryPassenger Car2004BuickTanATS2976WA

Disposition(s)

**Disposition** Count

S 1

Property

Date Code Type Make Model Description Tag No. Item No.

## **CAD Narrative**

08/04/2016: 15:40:55 ss0072 Narrative: 8921 16th pl

08/04/2016: 15:06:59 ss0072 Narrative: lea roman-x-2 hs to south-friends-off white-blazer in driveway-truck on road-kristin brian

mcfaden-last threat 2 weeks ago

08/04/2016: 14:50:45 SP0100 Narrative: AGENCY ADVISED

08/04/2016: 14:49:33 SP0428 Narrative: PH, COLD, DEATH THREATS BY EXGRFND CURRENT BYFRND, REQ SGT, SAYS

PATROL OFFICER WOULDNT' DO ANYTHING

## **COLLISION REPORT**

(C)		1 7 27								
	COLLISION REPORT  1591971  CASE # 2016-00015276									
1 1	STATE ROUTE V OTHER LINE STOLED LOCAL AGENCY CODING									
2 1	COUNTY RD  PRIVATE WAY	1 8 28								
3 1	RESERVATION									
	DATE OF COLLISION 08 - 05 - 2016 1149 31 N S W OF W OF W 0664 3									
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION BLOCK NO.									
4a	MILE POST 8300	0 1 29								
5	DISTANCE  OF (REFERENCE OR CROSS STREET)  740  00  MILES FEET S  N E W 81ST AVE SE									
	UNIT 01 MOTOR VEHICLE PEDAL- CYCLE DAMAGE THRESHOLD MET VES NO PHONE D: 4253146862	1 4 30								
6 3	LAST NAME GARRETT FIRST NAME KRISTINA MIDDLE INITIAL L									
	STREET NEW ADDRESS 15806 82ND ST NE									
7	CITY LAKE STEVENS ST WA ZIP 982589050	1 2 31								
8	CDL RESTRICTIONS ENDORSEMENTS 2									
9	DRIVER'S LICENSE # GARREKL107CZ STATE WA SEX F D.O.B. MMDDYYYY 02 _ 09 _ 1990 _ 1990									
10	ON DUTY STATUS AIRBAG 3 RESTR. 9 EJECT 1 HELMET 2 INJURY CLASS 7 NATURE OF INJURIES AIR BAG DEPLOYED-HOSPITAL CHECKOUT	32								
11 5 5	LICENSE PLATE # ASB6719 STATE WA VIN# JTEBU5JR2D5118644	$\perp$								
12 0 0	TRAILER PLATE # STATE TRAILER PLATE # STATE									
13 2	YES INO DICKS TOWING	7 3 33								
14	SHADE IN DAMAGED AREA  FRO  UNDURFAMOURAGE CO	9 34								
15 2	VEHICLE YES NO CITATION # CHARGE  CHARGE  CHARGE  DAMAGE THRESHOLD MET PHONE  4									
16	UNIT 02 VEHICLE V CYCLE PEDESTRIAN WINER VESV NO	36								
17	LAST IVAIVIE INITIAL INITIAL	37								
18	STREET NEW ADDRESS.	38								
·	CITY ST ZIP	39								
19	CDL RESTRICTIONS ENDORSEMENTS	40								
20	DRIVER'S LICENSE # SEX U D.O.B. MMDDYYYY									
21	ON DUTY STATUS AIRBAG RESTR. BEJECT BEJECT CLASS CLASS									
22	LICENSE PLATE # 054YPI STATE WA VIN# 2FMZA514X2BB50911									
23	TRAILER PLATE # STATE TRAILER PLATE # STATE 3	41								
24	VEH. YEAR 2002 MAKE FORD MODEL WINDSTA STYLE VEHICLE TOWED YES NO TOWED BY DICKS TOWING  REGISTERED OWNER INFO. UNKNOWN REPORT OF SALE PIERRE FORD SEATTLE LAKE STEVENS WA 98258  VEHICLE TOWED BY DICKS TOWING  VEHICLE NO. 2	42								
	LIABILITY INSURANCE INSURANCE CO & POLICY #									
25	VERICLE YES NO CITATION # CHARGE									
26	W. AUKERMAN 0072 WA0311900									
	PART A 3000-345-159 R (7/06)									





CORRECTION

REPORT NO.

E570708

		1
		ı `

2016-00015276

				ı	0, 10 = 1.									
	ADDIT	TIONA	L PERSONS	INVOL	LVED (PA	SEI	NGER	S AND/	OR W	VITNESS	S C	ONLY)		
NAME (LAST, FIRST, MIDDLE INITIAL)														
ADDRESS & PHONE #										SEX		O.B.		
PASSENGER WITNESS UNIT #		SEAT POS.	AIRI	BAG	REST	٦.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)														
ADDRESS & PHONE #										SEX	D. ммс	O.B.	_	
PASSENGER WITNESS UNIT #		SEAT POS.	AIRI	BAG	REST	٦.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)														
ADDRESS & PHONE #										SEX		O.B.	_	-
PASSENGER WITNESS UNIT #		SEAT POS.	AIRI	BAG	REST	٦.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
					NARR	ΙΤΙ	IVE							
W. AUKERMAN INVESTIGATING OFFICER'S SIGNATURE		UNI	T OR DIST. DET			TED		5:33 PM	_	PLA	CE S	IGNED		
APPROVED BY									DATE	8/5/201	6.5:1	35:03 PM		
W. AUKERMAN 0072  BADGE OR ID # 0072	ORI#	144.5.5	311000				TIPAT	POLICE	JODAT^		10 A		TIN 4	POLICE ARRIVED 11:50 AM

